## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	1641	20591	2/15	
O.I.P.E. CLASSIFIER	— <u></u>	10	3-1-00	
FORMALITY REVIEW		10	2700	
RESPONSE FORMALITY REVIEW				

## **INDEX OF CLAIMS**

~	Rejected	Ν	Non-elected
=	Allowed	Ι	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

— (Inrough numeral) Canceled A								
Claim Date	Claim	Pate	Claim	Date				
Prinal Driging	Final Original		Final Original					
1 00/1/2	51		101	<del>                                      </del>				
227 / =	52	<del>                                     </del>	102	<del></del>				
	53	╅╅┾┼┼	103	<del>-   -   -   -   -   -   -   -   -   -  </del>				
3 4 / / =	54	<del></del>	104					
4 5 7 -	55	<del>┦═╎╌╏╌╏</del> ╌╏		<del></del>				
4 5 7 2	56	╅┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼┼	105					
	57	┼┼┼┼┼	106	<del>-   - -   - - -</del>  -				
		++++++	107					
6 8 7 - =	58	<del></del>	108					
7 9 5 7 5	59		109					
	60		110					
	61		111 .					
9 12 V	62		112					
9 12 V - = 10 13 tr - =	63		113					
	64		114	<del></del>				
16	65	<del>                                     </del>	115	<del>-           -</del>				
16 1	66	<del>                                     </del>	116	<del>-   -   -   -   -   -   -   -   -   -  </del>				
	67	╅╅╌┼┼┼┼┥╴┞╸	117	<del></del>				
18	68	<del></del>	118	<del>-                                    </del>				
19 1	69	<del>                                     </del>		<del></del>				
20	1 <del>-1-1-1-1-1-</del>	<del>                                     </del>	119					
	70		120					
21	71		121					
22 -	72		122					
23	73		123					
24	74		124					
25	75		125					
26	76		126					
27	77		127	<del></del>				
28	78	<del>                                      </del>	128	<del></del>				
29	79	<del>                                     </del>	129	<del></del>				
30	80	<del></del>	130	<del></del>				
31	81	<del>┦═┞═╂═╏</del> ╌╏═	131	<del>-   -   -   -   -   -   -   -   -   -  </del>				
32	82	<del>┼┈┼┈┼┈┤┈</del> ┤╸├─	132	<del>-       -   -   -   -   -   -   -   -  </del>				
33	83	<del>                                     </del>		<del></del>				
34	84	<del>╎┈┼┈╎┈╎</del> ┈┤	133	<del>                                      </del>				
35	85	┾┼┼┼┼┼┤		<del>                                      </del>				
36	86	<del>┤┤┤</del> ╁┥┈┞╴	135	<del></del>				
37	<del></del>	<del>                                     </del>	136	<del>                                      </del>				
38	87	+++++	137					
	88	<del></del>	138					
39	89	<del></del>	139					
40	90		140	_				
41	91		141					
42	92		142					
43	93		143	<del></del>				
44	94		144	<del></del>				
45	95	<del>                                     </del>	145	<del>┈┤═┼┈┤╶┤═</del> ┼┈┤				
46.	96		146	<del></del>				
47	97	<del>                                     </del>	147	<del>╶╎┈╎┈╎┈╎</del> ┈┤┈┤┈┤				
48	98	<del>┤┤┤┤</del> ┤┤	148	╌┼┼┼┼┼┼				
49	99	<del>├─┼─┼</del> ─┼─┤ ├─	<del></del>	<del>┤┤┤</del> ┤┤┤				
50	100	<del>├─┼─┼─┼</del> ┤ ├─	149	<del>                                      </del>				
			150					

If more than 150 claims or 10 actions staple additional sheet here

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